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NASHUA, NH 03061-3445		Debra A.	Stensoel	(Depositor's name)	
			Clobra Q.	Sternach	(Signature)
			Septembe	5 11, 2006	(Date)
APPLICATION NO.	FILING DATE	FIRST NAMED INVEN	TOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.

Joan M. Fallon

TITLE OF INVENTION: METHODS FOR DIAGNOSING AND TREATING DYSAUTONOMIA AND OTHER DYSAUTONOMIC CONDITIONS

APPLN. TYPE	SMALL ENTITY	1550E FE	:E	PUBLICATION FEE	TOTALL	ED(0) DOD	DITTED
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LEITH, PA	TRICIA A	1655		424-198100			
I. Change of correspondence address or indication of "Fee Address" (37 CFR 1.56s).  Change of correspondence address (or Change of Correspondence Address from FTOSBH2)2 attached.  "Fee Address" indication (or "Fee Address" Indication form FTOSBH27; Rev 05-92 or more recent) attached. Use of a Customer Number is required.		(1) the n or agents (2) the na registered 2 register	inting on the patent front page, li ames of up to 3 registered pate OR, alternatively, ame of a single firm (having as d attorney or agent) and the nan ered patent attorneys or agents. If name will be printed.	nt attorneys a member a nes of un to	1Main 2 3	e & Asmus	

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